

# FILE NOTATIONS

Entered in NID File

Location Map Pinned

Card Indexed

✓  
.....  
✓  
.....  
✓  
.....

Checked by Chief

Approval Letter

Disapproval Letter

*PMB*  
.....  
*10-21-69*  
.....  
.....

## COMPLETION DATA:

Date Well Completed

*3-4-69*

Location Inspected

OW..... WW..... TA.....

Bond released

GW..... OS..... PA. *✓*

State or Fee Land

## LOGS FILED

Driller's Log.....

Electric Logs (No.) *3*.....

E..... I..... Dual I Lat..... GR *Density*..... Micro.....

BHC Sonic GR..... Lat..... Mi-L..... Sonic.....

CBLog..... CCLog..... Others... *Formation Density*

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK  
DRILL ☒ DEEPEN ☐ PLUG BACK ☐

b. TYPE OF WELL  
OIL WELL ☐ GAS WELL ☐ OTHER ☐ Wildcat ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. NAME OF OPERATOR  
Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR  
P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)\*  
At surface 1910' FSL, 660' FEL NE SE  
At proposed prod. zone Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE\*  
22 miles northeast of Boulder, Utah

15. DISTANCE FROM PROPOSED\* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if any)  
660' -

16. NO. OF ACRES IN LEASE  
600.00 ✓

17. NO. OF ACRES ASSIGNED TO THIS WELL  
200 ✓

18. DISTANCE FROM PROPOSED LOCATION\* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.  
-

19. PROPOSED DEPTH  
6300 ✓

20. ROTARY OR CABLE TOOL  
Rotary ✓

21. ELEVATIONS (Show whether DF, RT, GR, etc.)  
GR 5361' ✓

22. APPROX. DATE WORK WILL START\*  
November 8, 1968 ✓

23. PROPOSED CASING AND CEMENTING PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH    | QUANTITY OF CEMENT |
|--------------|----------------|-----------------|------------------|--------------------|
| 17-1/2       | 13-3/8 ✓       | 48 ✓            | 200 ✓            | 200 ✓              |
| 8-3/4        | 4-1/2 ✓        | 11.6 ✓          | To be determined |                    |

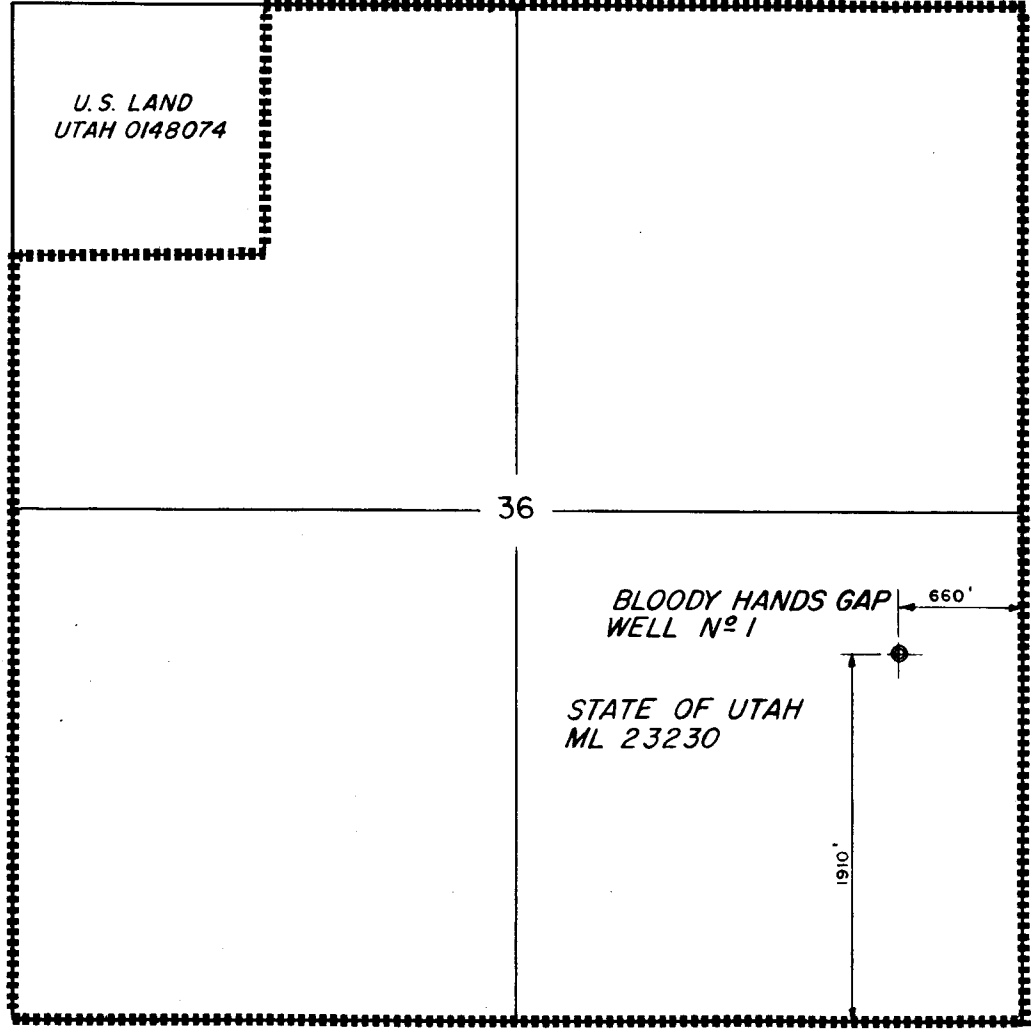
We would like your permission to drill the subject well to an estimated depth of 6300'. Anticipated formation tops are as follows: Entrada at the surface, Canyonlands at 200', Navajo at 400', Kayenta at 1200', Wingate at 1500', Chinle at 1800', Shinarump at 2200', Moenkopi at 2250', Kaibab at 3000', White Rim-Organ Rock-Toroweap (unstratified) at 3150', Hermosa at 4400', Redwall at 5600'. ✓

Drilling bond and location plats are attached. ✓

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present productive zone and proposed productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths, and preventer program, if any.

24. General Manager  
Gas Supply Operations  
SIGNED BW Croft TITLE \_\_\_\_\_  
(This space for Federal or State office use)  
PERMIT NO. \_\_\_\_\_ APPROVAL DATE \_\_\_\_\_  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

T. 31 S., R. 7 E. S. L. B. & M.  
UTAH



**LOCATION DATA**

WELL - Bloody Hands Gap Unit N° 1      FIELD - Bloody Hands Gap

LOCATION  
1910' From South Line  
660' From East Line  
NE SE Sec. 36, T. 31 S., R. 7 E. S. L. B. & M.  
Garfield County, Utah

ELEVATION  
5361' ground

SURVEYED BY  
Ernst Engineering Co., Durango, Colorado

DATE OF REPORT  
October 21, 1968

REMARKS  
Well elevation-natural ground


ENGINEER'S AFFIDAVIT

STATE OF WYOMING }  
COUNTY OF SWEETWATER }<sup>ss</sup>

I, K. A. Loya of Rock Springs Wyoming, hereby certify that this map was made from notes taken during an actual survey made under my direction by Ernst Engineering Co. Durango, Colorado on October 21, 1968; and that it correctly represents the location thereon with section measurements based on the official survey Plat of Township 31 S., R. 7 E., S. L. B. & M. UTAH

*K. A. Loya*  
Engineer

Utah Registration N° 2707

| REVISIONS |             |      |    |  <b>MOUNTAIN FUEL</b><br>SUPPLY COMPANY<br>ROCK SPRINGS, WYOMING |  |
|-----------|-------------|------|----|---|--|
| NO.       | DESCRIPTION | DATE | BY |   |  |
|           |             |      |    | <b>WELL LOCATION</b><br><b>BLOODY HANDS GAP N° 1</b><br>NE SE SEC. 36, T. 31 S., R. 7 E. S. L. B. & M.<br>GARFIELD COUNTY, UTAH                       |  |
|           |             |      |    |   |  |
|           |             |      |    |   |  |
|           |             |      |    |   |  |
|           |             |      |    |   |  |
|           |             |      |    |   |  |
|           |             |      |    | DRAWN: 10-29-68 FJC      SCALE: 1" = 1000'  |  |
|           |             |      |    | CHECKED: <i>Rum</i> CK      DRWG. NO. M-9407  |  |
|           |             |      |    | APPROVED: KAL   |  |

October 31, 1968

Mountain Fuel Supply Company  
P. O. Box 1129  
Rock Springs, Wyoming 82901

Re: Well No. Bloody Hands Gap Unit  
#1, Sec. 36, T. 31 S., R. 7 E.,  
Garfield County, Utah.

Gentlemen:

Insofar as this office is concerned, approval to drill the above mentioned well is hereby granted.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

Paul W. Burchell, Chief Petroleum Engineer  
Home; 277-2890 - Salt Lake City, Utah  
Office: 328-5771

This approval terminates within 90 days if the well has not been spudded-in within said period.

Enclosed please find Form OGC-8-X, Report of Water Encountered During Drilling, which is to be completed whether or not water sands (aquifers) are encountered while drilling. Your cooperation with respect to completing this form will be greatly appreciated.

Since this well is located within a soon to be federal approved unit agreement, this office would appreciate receiving unexecuted copy of Bloody Hands Gap Unit Agreement.

Mountain Fuel Supply Company

October 31, 1968

-2-

The API number assigned to this well is 43-017-30008 (see Bulletin D12 published by the American Petroleum Institute).

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

CLEON B. FEIGHT  
DIRECTOR

CBF:sc

cc: Division of State Lands  
105 State Capitol Building  
Salt Lake City, Utah

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRI  
(Other instruction  
verse side)Form approved  
Budget Bureau No. 42-R1426

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|  |  |
|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Wildcat  | 7. UNIT AGREEMENT NAME<br>Bloody Hand Gas Unit                 |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  | 8. FARM OR LEASE NAME<br>Unit Well                             |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  | 9. WELL NO.<br>121   |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1910' FSL, 660' FEL NE SE | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                      |
| 14. PERMIT NO.<br>-  | 11. SEC. T. R. OR B. AND<br>SURVEY OR AREA<br>36-315-71, S1B6N |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>GR 5361'   | 12. COUNTY OR PARISH<br>Garfield Utah                          |

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary History ☐

(NOTE: Report results of multiple completion or well completion or recompletion report and log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and boundaries pertinent to this work.)

Depth 520', air drilling.

Spudded December 5, 1968.

Landed 13-3/8", 48#, H-40, ST&amp;C casing at 205.81' KBM and set with 22# cement treated with 423# calcium chloride, returned 10 barrels to surface.

18. I hereby certify that the foregoing is true and correct

SIGNED

BW Craft

TITLE

Vice President,  
Gas Supply Operations

DATE

Dec. 10, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRII  
(Other instruction  
verse side)Form approved.  
Budget Bureau No. 42-R1424.5. LEASE DESIGNATION AND SERIAL NO.  
State of Utah ML-23230

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|  |   |
|--|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Wildcat   | 7. UNIT AGREEMENT NAME<br>Bloody Hands Gap Unit                         |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  | 8. FARM OR LEASE NAME<br>Unit Well                                      |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  | 9. WELL NO.<br>1  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1910' FSL, 660' FEL NE SE | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                               |
| 14. PERMIT NO.<br>-  | 11. SEC., T., R., M., OR E.L.K. AND SURVEY OR AREA<br>36-31S-7E., SLB&M |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>KB 5372.60' GR 5361'   | 12. COUNTY OR PARISH 13. STATE<br>Garfield Utah                         |

## 18. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history ☒

## SUBSEQUENT REPORT OF

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Depth 2446', now reaming 8-3/4" hole to 12 1/4".

19. I hereby certify that the foregoing is true and correct

SIGNED

*B. W. Croft*

TITLE

Vice President  
Gas Supply Operations

DATE

Dec. 16, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

|  |  |   |  |
|--|--|---|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wildcat   |  | 3. LEASE DESIGNATION AND SERIAL NO.<br>State of Utah ML-23230         |  |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  |  | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME                                  |  |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  |  | 7. UNIT AGREEMENT NAME<br>Bloody Hands Gap Unit                       |  |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1910' FSL, 660' FEL NE SE |  | 8. FARM OR LEASE NAME<br>Unit Well                                    |  |
| 14. PERMIT NO.<br>-  |  | 9. WELL NO.<br>1  |  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>KB 5372.60' GR 5361'   |  | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                             |  |
|  |  | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA<br>36-31S-7E., SLB&M |  |
|  |  | 12. COUNTY OR PARISH<br>Garfield                                      |  |
|  |  | 13. STATE<br>Utah   |  |

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
(Other) ☐PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
ABANDON\* ☐  
CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) ☐

Supplementary history

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Depth 2446' of 8-3/4" hole, 2440' of 12 1/4" hole, now running 10-3/4" intermediate casing.

18. I hereby certify that the foregoing is true and correct

SIGNED

B.W. Croft

TITLE

Vice President,  
Gas Supply Operations

DATE

Dec. 23, 1968

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

LEASE DESIGNATION AND SERIAL NO.

State of Utah ML 23230

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Bloody Hands Gap Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLM. AND  
SURVEY OR AREA

36-3LS-7E., SLB&amp;M

12. COUNTY OR PARISH 13. STATE

Garfield Utah

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL WELL ☐ GAS WELL ☐ OTHER ☐ Wildcat

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

1910' FSL, 660' FEL NE SE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 5372.60' GR 5361'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history ☒REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Depth 3417", filling hole with mud.

Landed 2418.80' net, 2438.27' gross of 10-3/4" OD, 32.75# H-40 and 40.50# K-55 intermediate casing at 2430.40' KBM and set with 375 sacks of cement, returned approximately 83 barrels cement slurry to surface. ✓

18. I hereby certify that the foregoing is true and correct

SIGNED

BW Croft

TITLE

Vice President,  
Gas Supply Operations

DATE

Dec. 30 1968

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPL  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

State of Utah ML-23230

6. IF INDIA, ALLOTTEE, OR TRIBE NAME

7. UNIT AGREEMENT NAME

Bloody Hands Gas Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR DEK. AND  
SURVEY OR AREA

36-31S-7E., SLB&amp;M

12. COUNTY OR PARISH 13. STATE

Garfield

Utah

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL ☐ WELL GAS ☐ WELL OTHER Wildcat

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1910' FSL, 660' FEL NE SE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 5372.60'

GR 5361'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

Supplementary history

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and  
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones per-  
nent to this work.)\*

Depth 4933', pipe stuck at 4933'.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft Jr

TITLE

Vice President,  
Gas Supply Operations

DATE

Jan. 7, 1969

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIP!  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-R1424

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|   |  |  |
|---|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wildcat  |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>State of Utah ML 33230          |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company   |  | 6. IF INDIAN, ALLOTTEE OR TRUST NAME                                   |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901   |  | 7. UNIT AGREEMENT NAME<br>Bloody Hands Gap                             |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.<br>See also space 17 below.)<br>At surface<br>1910' FSL, 660' FEL NE SE |  | 8. FARM OR LEASE NAME<br>Unit Weekly                                   |
| 14. PERMIT NO.<br>-   |  | 9. WELL NO.  |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>KB 5372.60' GR 5361'  |  | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                              |
|   |  | 11. SEC., T., R. M. OR B. L. AND<br>SURVEY OR AREA<br>36-31S 7E, SLB&M |
|   |  | 12. COUNTY OR PARISH<br>Garfield                                       |
|   |  | 13. STATE<br>Utah  |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT   |  |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>   | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>   | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/>  | ABANDONMENT <input type="checkbox"/>     |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) Supplementary history <input type="checkbox"/>  |  |
| (Other) <input type="checkbox"/>             |   | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |  |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and segments pertinent to this work.)\*

Depth 5182', recovered fish, making DST #1.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Croft Jr. TITLE Vice President, Gas Supply Operations DATE Jan 20 1969

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRI  
(Other instruction re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|  |  |   |
|--|--|---|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wildcat   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>State of Utah ME 23230       |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  |  | 6. IF INDIAN, ALLOTTEE, OR TRUST, SAME                              |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  |  | 7. UNIT AGREEMENT NAME<br>Bloody Hands Gap Unit                     |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><br>1910' FSL, 660' FEL NE SE |  | 8. FARM OR LEASE NAME<br>Unit Well                                  |
| 14. PERMIT NO.<br>-  | 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>KB 5372.60' GR 5361' | 9. WELL NO.   |
|  |  | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                           |
|  |  | 11. SEC. T. R. M. OR BLK. AND<br>SURVEY OR AREA<br>36-31S-7E, S1B&M |
|  |  | 12. COUNTY OR PARISH, 18 STATE<br>Garfield Utah                     |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO:                      |   | SUBSEQUENT REPORT OF   |  |
|--|---|--|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/>  | REPAIRING WELL <input type="checkbox"/>  |
| FRACTURE TREAT <input type="checkbox"/>      | MULTIPLE COMPLETE <input type="checkbox"/>    | FRACTURE TREATMENT <input type="checkbox"/>  | ASTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/>    | ABANDON* <input type="checkbox"/>             | SHOOTING OR ACIDIZING <input type="checkbox"/>   | ABANDONMENT* <input type="checkbox"/>    |
| REPAIR WELL <input type="checkbox"/>         | CHANGE PLANS <input type="checkbox"/>         | (Other) Supplementary History <input type="checkbox"/>   |  |
| (Other)                                      |   | (NOTE: Report results of multiple completion on Well<br>Completion or Recompletion Report and Log form.) |  |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated dates of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Depth 6123', drilling.

DST #1: 5127-5182', Hermosa, IO 1/2 hour, ISI 1 hour, FO 1 hour, FSI 2 hours, opened with weak blow on both openings, no gas to surface, recovered 186' mud, 165' water, cut mud and 1035' fresh water. IHP 2401, ISIP 1848, IOFP's 18-335, FOEP 345-765, FSIP 1834, FHP 2380 psi.

18. I hereby certify that the foregoing is true and correct

SIGNED B. H. Craft Jr. TITLE Vice President, Gas Supply Operations DATE Jan. 27, 1964

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIANGLE  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 43-11424.

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

|  |  |  |
|--|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Wildcat   |  | 5. LEASE DESIGNATION AND SERIAL NO.<br>State of Utah ME 23230          |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  |  | 6. IF INDIAN, ALLOTTEE OR TRUST NAME                                   |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  |  | 7. UNIT AGREEMENT NAME<br>Bloody Hands Gap Unit                        |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br>1910' FSL, 660' FEL NE SE |  | 8. FARM OR LEASE NAME<br>Unit Well                                     |
| 14. PERMIT NO.<br>-  |  | 9. WELL NO.<br>1   |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.)<br>KB 5372.60' GR 5361'   |  | 10. FIELD AND POOL, OR WILDCAT<br>Wildcat                              |
|  |  | 11. SEC., T., R., M., OR BLM. AND<br>SURVEY OR AREA<br>36-31S-7E., SLB |
|  |  | 12. COUNTY OR PARISH<br>Garfield Utah                                  |

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary historyREPAIRING WELL ☐ABANDONING CASING ☐ABANDONMENT\* ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

## 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Depth 6123', drilling.

DST #1: 5127-5182', Hermosa, IO  $\frac{1}{2}$  hour, ISI 1 hour, FO 1 hour, FSI 2 hours, opened with weak blow on both openings, no gas to surface, recovered 186' mud, 165' gas, cut mud and 1035' fresh water. IHP 2401, ISIP 1848, IOFP's 18-335, FOFP 345-365, FSIP 1834, FHP 2380 psi.

## 18. I hereby certify that the foregoing is true and correct

SIGNED

B. H. Craft

TITLE

Vice President,  
Gas Supply Operations

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

DATE

\*See Instructions on Reverse Side

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLA  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

State of Utah ML-23230

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Bloody Hands Gap Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR B.L. AND  
SURVEY OR AREA

36-31S-7E., SLB&amp;M

12. COUNTY OR PARISH 13. STATE

Garfield Utah

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL ☐ GAS ☐ OTHER Wildcat  
WELL WELL

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1910' FSL, 660' FEL NE SE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 5372.6' GR 5361'

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐

(Other)

Supplementary history

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Depth 6648', logged, tearing down loggers.

DST #2: 6518-6648', IO  $\frac{1}{2}$  hour, ISI 1 hour, FO  $\frac{1}{2}$  hour, FSI 1 hour, opened very strong decreasing to weak in  $\frac{1}{2}$  hour, reopened very weak, dead in 6 minutes, recovered 460' drilling mud and 5340' fresh water. IHP 3061, IOFP's 975-2487, ISIP 2516, FOFP's 2516-2516, FSIP 2516, FHP 3061 psi.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. W. Croft

TITLE

Vice President,  
Gas Supply Operations

DATE

Feb. 10, 1969

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPL  
(Other instructions  
verse side)Form approved.  
Budget Bureau No. 42-B1424.5. LEASE DESIGNATION AND SERIAL NO.  
State of Utah ME 23230

6. IF INDEXED BY LOTTERY OR TOWER NAME

7. UNIT AGREEMENT NAME  
Bloody Hands Gas Unit8. FARM OR LEASE NAME  
Unit Well

9. WELL NO.

10. FIELD, AREA, POOL, OR WITHIN AREA  
Wildcat11. SEC., T., R., M., OR B.E., AND  
SURVEY OR AREA  
36-3B-7E., ALB&M12. COUNTY OR PARISH  
Garfield1. OIL ☐ WELL ☐ GAS ☐ WELL ☐ OTHER Wildcat

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 829014. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface1910' FSL, 660' FEL NE SE

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 5372.6' GR 5361'

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐

(Other)

PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☒CHANGE PLANS ☐

## SUBSEQUENT REPORT OF

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Supplementary history

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

TD 6648', rig released February 4, 1969.

Verbal approval was granted during a telephone conversation on February 1969 between Mr. R. Smith with the U.S.G.S. and Mr. J. Sanna with Mountain Fuel Supply Company to plug and abandon the subject well by laying the following plugs:

Plug No. 1: 6400-6200' - 68 sacksPlug No. 2: 4982-4882' - 34 sacksPlug No. 3: 3500-3300' - 68 sacksPlug No. 4: 2455-2305' - 68 sacks, this plug is 125' up in and 25' 10-3/4" casing.No top plug in the 10-3/4" casing at the surface.

18. I hereby certify that the foregoing is true and correct

SIGNED

B.W. Craft

TITLE

Vice President,  
Gas Supply Operations

DATE

Feb 11 1969

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN REVERSE SIDE  
(Other instructions on re-Form approved.  
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

State of Utah ML-2323

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)1. OIL WELL ☐ GAS WELL ☐ OTHER Wildcat

2. NAME OF OPERATOR

Mountain Fuel Supply Company

3. ADDRESS OF OPERATOR

P. O. Box 1129, Rock Springs, Wyoming 82901

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

1910' FSL, 660' FEL NE SE

7. UNIT AGREEMENT NAME

Bloody Hands Gap Unit

8. FARM OR LEASE NAME

Unit Well

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

36-31S-7E., S1B&amp;M

12. COUNTY OR PARISH

Garfield

13. STATE

Utah

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

KB 5372.6' GR 5361'

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON\*

CHANGE PLANS

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

TD 6648', rig released February 4, 1969, well plugged and abandoned as follows:

Plug No. 1: 6400-6200' - 68 sacks  
Plug No. 2: 4982-4882' - 34 sacks  
Plug No. 3: 3500-3300' - 68 sacks  
Plug No. 4: 2455-2305' - 68 sacks

Plug No. 4 is 125' up in and 25' out of the 10-3/4" casing, no top plug in the 10-3/4" casing at the surface.

An abandonment marker will be installed and the location cleaned at a later date.

18. I hereby certify that the foregoing is true and correct

SIGNED

B. W. Craft

TITLE

Vice President,  
Gas Supply Operations

DATE

Feb. 10, 1969

(This space for Federal or State office use)

(ORIG. SGD.) R. A. SMITH

APPROVED BY

TITLE

DISTRICT ENGINEER

DATE

MAY 1969

CONDITIONS OF APPROVAL, IF ANY:



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE

(See instructions on  
reverse side)Form approved.  
Budget Bureau No. 42-R355.5.

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

|  |                 |  |                                    |  |                                    |   |                 |
|--|-----------------|--|------------------------------------|--|------------------------------------|---|-----------------|
| 1a. TYPE OF WELL:  |                 | OIL WELL <input type="checkbox"/>                                    | GAS WELL <input type="checkbox"/>  | DRY <input checked="" type="checkbox"/>        | Other _____                        |   |                 |
| b. TYPE OF COMPLETION:   |                 | NEW WELL <input checked="" type="checkbox"/>                         | WORK OVER <input type="checkbox"/> | DEEP-EN <input type="checkbox"/>               | FLUG BACK <input type="checkbox"/> | DIFF. RESVR. <input type="checkbox"/>   | Other _____     |
| 2. NAME OF OPERATOR<br>Mountain Fuel Supply Company  |                 |  |                                    |  |                                    |   |                 |
| 3. ADDRESS OF OPERATOR<br>P. O. Box 1129, Rock Springs, Wyoming 82901  |                 |  |                                    |  |                                    |   |                 |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*<br>At surface 1910' FSL, 660' FEL NE SE<br>At top prod. interval reported below Same<br>At total depth Same |                 |  |                                    |  |                                    |   |                 |
| 14. PERMIT NO.   |                 |  |                                    | DATE ISSUED                                    |                                    |   |                 |
| -  |                 |  |                                    | -  |                                    |   |                 |
| 5. LEASE DESIGNATION AND SERIAL NO.  |                 | State of Utah ME-23230   |                                    |  |                                    |   |                 |
| 6. IF INDIAN, ALLOTTEE OR TRIBE NAME   |                 | -  |                                    |  |                                    |   |                 |
| 7. UNIT AGREEMENT NAME   |                 | Bloody Hands Gap Unit  |                                    |  |                                    |   |                 |
| 8. FARM OR LEASE NAME  |                 | Unit Well  |                                    |  |                                    |   |                 |
| 9. WELL NO.  |                 | 1  |                                    |  |                                    |   |                 |
| 10. FIELD AND POOL, OR WILDCAT   |                 | Wildcat  |                                    |  |                                    |   |                 |
| 11. SEC. T. R. M., OR BLOCK AND SURVEY OR AREA   |                 | 36-31S-7E., SLB&M  |                                    |  |                                    |   |                 |
| 12. COUNTY OR PARISH   |                 | Garfield   |                                    | 13. STATE                                      |                                    | Utah                                    |                 |
| 15. DATE STUDED  |                 | 16. DATE T.D. REACHED  |                                    | 17. DATE COMPL. (Ready to prod.)               |                                    | 18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* |                 |
| 12-5-68  |                 | 2-1-69   |                                    | 2-4-69   |                                    | KB 5372.6' GR 5361'                     |                 |
| 20. TOTAL DEPTH, MD & TVD  |                 | 21. FLUG, BACK T.D., MD & TVD  |                                    | 22. IF MULTIPLE COMPL., HOW MANY*              |                                    | 23. INTERVALS DRILLED BY                |                 |
| 6648   |                 | 2305   |                                    |  |                                    | ROTARY TOOLS<br>0-6648                  |                 |
| 24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*<br>Dry and abandoned   |                 |  |                                    |  |                                    | 25. WAS DIRECTIONAL SURVEY MADE?<br>No  |                 |
| 26. TYPE ELECTRIC AND OTHER LOGS RUN<br>Dual Induction-Laterolog, Compensated Formation Density  |                 |  |                                    |  |                                    | 27. WAS WELL CORED<br>No                |                 |
| 28. CASING RECORD (Report all strings set in well)   |                 |  |                                    |  |                                    |   |                 |
| CASING SIZE  | WEIGHT, LB./FT. | DEPTH SET (MD)   | HOLE SIZE                          | CEMENTING RECORD                               |                                    | AMOUNT PULLED                           |                 |
| 13-3/8   | 48              | 205.81   | 17-1/4                             | 225  |                                    | 0                                       |                 |
| 10-3/4   | 40.5 & 32.75    | 2430.40  | 12-1/4                             | 375  |                                    | 0                                       |                 |
| 29. LINER RECORD   |                 |  |                                    |  |                                    |   |                 |
| SIZE   | TOP (MD)        | BOTTOM (MD)  | SACKS CEMENT*                      | SCREEN (MD)                                    | 30. TUBING RECORD                  |   |                 |
|  |                 |  |                                    |  | SIZE                               | DEPTH SET (MD)                          | PACKER SET (MD) |
| 31. PERFORATION RECORD (Interval, size and number)   |                 |  |                                    | 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC. |                                    |   |                 |
|  |                 |  |                                    | DEPTH INTERVAL (MD)                            |                                    |   |                 |
|  |                 |  |                                    | AMOUNT AND KIND OF MATERIAL USED               |                                    |   |                 |
|  |                 |  |                                    |  |                                    |   |                 |
|  |                 |  |                                    |  |                                    |   |                 |
| 33. PRODUCTION   |                 |  |                                    |  |                                    |   |                 |
| DATE FIRST PRODUCTION  |                 | PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) |                                    |  |                                    | WELL STATUS (Producing or shut-in)      |                 |
| Dry & abandoned  |                 |  |                                    |  |                                    |   |                 |
| DATE OF TEST   | HOURS TESTED    | CHOKE SIZE   | PROD'N. FOR TEST PERIOD            | OIL—BBL.                                       | GAS—MCF.                           | WATER—BBL.                              | GAS-OIL RATIO   |
|  |                 |  | →                                  |  |                                    |   |                 |
| FLOW, LOGGING TESTS.   | CASING PRESSURE | CALCULATED 24-HOUR RATE  | OIL—BBL.                           | GAS—MCF.                                       | WATER—BBL.                         | OIL GRAVITY-API (CORR.)                 |                 |
|  |                 | →  |                                    |  |                                    |   |                 |
| 34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)   |                 |  |                                    |  |                                    | TEST WITNESSED BY                       |                 |
|  |                 |  |                                    |  |                                    |   |                 |
| 35. LIST OF ATTACHMENTS  |                 |  |                                    |  |                                    |   |                 |
| Dual Induction-Laterolog, F Density, Lithology log, Well Completion log  |                 |  |                                    |  |                                    |   |                 |
| 36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records  |                 |  |                                    |  |                                    |   |                 |
| SIGNED <u>B. H. Croft</u>  |                 |  |                                    | Vice President,                                |                                    | DATE Feb. 14, 1969                      |                 |
| TITLE <u>Gas Supply Operations</u>   |                 |  |                                    |  |                                    |   |                 |

\*(See Instructions and Spaces for Additional Data on Reverse Side)

FORM OGC-8-X

FILE IN QUADRUPLICATE

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL & GAS CONSERVATION  
1588 West North Temple

SALT LAKE CITY, UTAH 84111

REPORT OF WATER ENCOUNTERED DURING DRILLING

Well Name & Number Bloody Hands Gap Unit #1

Operator Mtn. Fuel Supply Address Box 11368 Phone 328-8315

Contractor Loffland Address Casper, Wyoming Phone \_\_\_\_\_

Location NE 1/4 SE 1/4 Sec. 36 T. 31 N R. 7 E Garfield County, Utah  
S W

Water Sands:

| <u>Depth</u>       | <u>Volume</u>  | <u>Quality</u>                  |                |
|--------------------|--|---------------------------------|----------------|
| From               | To   | Flow Rate or Head               | Fresh or Salty |
| 1. At 600'         | water while air drilling.                            | At 1191' estimated 100 bbls hr. |                |
| 2. At 2440'        | increased to 350 bbl per hr.                         |                                 |                |
| 3. At 3417'        | while air drilling fresh water stopped air drilling. |                                 |                |
| 4. Recovered 1686' | fresh water on DST 5127' to 5182'                    |                                 |                |
| 5. Recovered 5340' | fresh water on DST 6518' to 6648'                    |                                 |                |

(Continued on reverse side if necessary)

|                        |               |                      |       |             |
|------------------------|---------------|----------------------|-------|-------------|
| <u>Formation Tops:</u> | Navajo 590'   | Moenkopi             | 2766' | T. D. 6648' |
|                        | Kayenta 1620' | Kaibab               | 3400' |             |
|                        | Wingate 1960' | White Rim-Cedar Mesa | 3460' |             |
| <u>Remarks:</u>        | Chinle 2290'  | Hermosa              | 4932' |             |
|                        |               | Molas                | 6140' |             |
|                        |               | Redwall              | 6344' |             |

NOTE: (a) Upon diminishing supply forms, please inform this office,  
(b) Report on this form as provided for in Rule C-20, General Rules and Regulations and Rules of Practice and Procedure, (See back of form)  
(c) If a water analysis has been made of the above reported zone, please forward a copy along with this form.

*Schute*

**MOUNTAIN FUEL SUPPLY COMPANY**

SALT LAKE CITY, UTAH 84111

September 15, 1969

Utah State Land Board  
Room 105, State Capitol  
Salt Lake City, Utah 84114

Gentlemen:

Re Oil and Gas Drilling Bond No. 695665

The captioned drilling bond was secured prior to the drilling of an exploratory well during 1968. The premium covering this drilling bond is due and payable on or before October 18, 1969.

According to our records, the location has been cleaned up and we request that you notify the bonding company that this drilling bond may be terminated.

A copy of your letter advising the bonding company is requested for our files and record.

Very truly yours,

ORIGINAL SIGNED BY  
G. A. PEPPINGER

G. A. Peppinger  
Chief Landman

GAP:ga

cc: Utah Oil and Gas Conservation Commission  
1588 West North Temple  
Salt Lake City, Utah 84116

Fred A. Moreton & Company  
645 East South Temple  
Salt Lake City, Utah 84102

COPY